

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	IC NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		45	5/20
FORMALITY REVIEW	R.	TC 873	06-19-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

BEST AVAILABLE COPY

✓ ..... Rejected  
 = ..... Allowed  
 (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date	
Final	Original	
1	02/01/03	
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Claim	Date	
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Claim	Date	
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If more than 150 claims or 10 actions  
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